DISTRICT CO	OURT, DOUGLAS COUNTY, COLORADO					
Court Address	s: 4000 Justice Way Castle Rock, CO 80109					
Petitioner:						
COTTONWO	OD METROPOLITAN DISTRICT	▲ COURT USE ONLY ▲				
Attorney for	Petitioner:					
Name: Address:	George M. Rowley, Esq. WHITE BEAR ANKELE TANAKA & WALDRON	Case Number: 1981CV00195  Division: 3				
	Attorneys at Law 2154 E. Commons Ave., Suite 2000 Centennial, CO 80122	Courtroom:				
Phone: Fax: Email: Atty. Reg. #:	(303) 858-1800 (303) 858-1801 growley@wbapc.com 31089					
BOARD OF DIRECTORS OATH OF OFFICE						
STATE OF C	OLORADO ) ss.					
COUNTY OF	,					
support the Collaws of the St the Cottonwood In accordance	en, do [_] swear, [_] affirm or [] swear be constitution of the United States, the Constitution ate of Colorado, and will faithfully perform the od Metropolitan District upon which I am about with § 32-1-901(2), C.R.S. the bond required the ded herewith as Exhibit A.	of the State of Colorado, and the duties of the office of Director of to enter to the best of my ability.				
Richard A Nielsen						
Signature						

STATE OF COLORADO ) ss. COUNTY OF Elbert )

Signed and sworn to (or affirmed) before me this 27th day of May, 2020 via audio-video technology.

(SEAL)

My commission expires: 4,1,2024

KAYLIN CHRISTINE HICKS NOTARY PUBLIC STATE OF COLORADO NOTARY ID 20204012417 MY COMMISSION EXPIRES APRIL 1, 2024 Kaylın Hicks

#### **EXHIBIT A**

Director Bond

1419.0011: 1043363



writing by the Company.

or Employee or position.

RLI Insurance Company P.O. Box 3967 Peoria IL 61612-3967 Phone: (309)692-1000 Fax: (309)683-1610

# PUBLIC OFFICIAL POSITION SCHEDULE BOND

Bond No. <u>LSM0842424</u>

lter	m 1. Name of Insured:	Cottonwood Metropo	olitan District			
	Principal Address:	c/o White Bear Anke Centennial, CO 8012		2154 East Comm	ons Avenue, Suite	(the "Insured") e 2000
lter	m 2. Bond Period m 3. Limit of liability do the Company as to eac	es not exceed the sun	n specified in the Sch		ositions or writter	n acceptances
l.	INSURING AGREEMS The RLI Insurance C held and firmly bound	company, an Illinois c	•		•	•
	of Cer Official or Employee vacceptance of the Con	ntennial while occupying any p	_, <u>CO</u> , Obligee, for position named in th	the faithful dischar e schedule attach	arge of the duties ned, or added the	s of any Public ereto by written
II.	CONDITIONS  A. Coverage. Automatic coverage is granted for the first thirty days service of any Public Official or Employee:  (1) Occupying a newly created position identical with one listed in the schedule of positions, in an equal amount.					
	beginning, unless	er, that the automatic during the said thirty dule, and the Compan	day period the Obli	gee has requeste	ed in writing that	
	Coverage on any	position may be incre	eased or decreased ι	ıpon written reque	est of the Obligee	, if agreed to in

C. Liability. The Company's liability under this bond shall not be cumulative, and in no event shall the Company be called upon to pay as a loss hereunder in an amount greater than the largest single amount for which the position occupied by any Public Official or Employee causing such loss is or has been covered in the schedule, whether said loss occurred during any one or more years. The liability of the Company for any Public Official or Employee occupying more than one position at one time, or at different times, shall not exceed the largest amount of coverage specified for any single position occupied by said Public Official or Employee. The liability of the Company shall never exceed the amount in effect for the position when the act

**B.** Cancellation. Cancellation hereunder is effective, and all liability under this bond shall cease as to future acts or omissions as to any Public Official or Employee on the date specified in written notice given by the Obligee to the Company as to any or all positions or Public Officials or Employees, or after thirty days' written notice given by the Company to the Obligee of its intent to cancel this bond in its entirety, or as to any Public Official

OFF 0102 (2/93)

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of the Public Official or Employee causing the loss shall have occurred. In the event there are more Public Officials or Employees occupying the position covered in the schedule than are listed therein, the Company shall be liable for such proportion of the amount of coverage as the number of Public Officials or Employees listed bears to the number of Public Officials or Employees actually occupying the position when the loss occurred.

The Liability of the Company hereunder is subject to the terms and conditions of the following Riders, attached thereto:

None of the specifications of this Bond shall be altered or waived, except in writing by the Company executed by its President, Vice President, Secretary, Assistant Secretary or Treasurer.

Dated this 11th day of March, 2016.

**RLI Insurance Company** 

By \_\_\_\_\_\_\_ Vice President

CORPORATE SEAL

OFF 0102 (2/93)

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SCHEDULE OF POSITIONS - EFFECTIVE THE <u>15th</u> DAY OF <u>March</u>, <u>2016</u>.

(If there is more than one position of like classification, list by number, thus: Cashier No. 1, Cashier No. 2)

Schedule Number	Position Name	No.	Position Location	Bond Amount
1	Treasurer	1		\$ 5,000.00
2	Board Member	1		\$ 1,000.00
3	Board Member	1		\$ 1,000.00
4	Board Member	1		\$ 1,000.00
5	Board Member	1		\$ 1,000.00
6	Board Member	1		\$ 1,000.00
7				
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RLI Insurance Company
P.O. Box 3967 Peoria IL 61612-3967
Phone: (309)692-1000 Fax: (309)683-1610

## **POWER OF ATTORNEY**

## **RLI Insurance Company**

Bond No. <u>LSM0842424</u>

### Know All Men by These Presents:

That the	RLI Insur	ance Company	, a corporation	organized and ex	xisting under the la	ws of the State of
Illin	ois , and	d authorized and licensed	to do business in all	states and the Dis	strict of Columbia d	loes hereby make,
constitute and ap	opoint:	Barton W. Davis	in the Cit	ty of	Peoria	, State of
Illinoi	s, as	Vice President	, with full power	and authority her	reby conferred upor	n him/her to sign,
execute, acknow	ledge and deliver f	for and on its behalf as S	urety, in general, any	and all bonds, u	ndertakings, and rea	cognizances in an
amount not to	exceed	Five Hundred Thousand	and 00/100	Dollars (	\$ 500,000.00	_) for any single
obligation, and s	specifically for the f	ollowing described bond.				
Principal:	_Cottonwood Me	tropolitan District				
Obligee:	Same as Princip	al				
Type Bond:	Public Official F	Position Schedule Bond				
<b>Bond Amount:</b>	\$ 10,000.00					
<b>Effective Date:</b>	March 15, 2016					
The	RLI Insurance	e Company	further certifies	that the follow	ing is a true and	exact copy of a
		Directors of				
undertakings,		ne Company. The corp ney or other obligation y facsimile.''				
		RLI Insurar				
its Vice	e President	with its corporate seal a	ffixed this 11th	day of <u>Ma</u>	rch , 2016	<u>_</u> ·
ATTEST:	LMatra	WINITE HE WILL	SEAL	Insurance Com		
Cherie L. Montgo	mery Oruguite	Ssistant Secretary	Barto	on W. Davis	<u> </u>	Vice President
	vice President  RLI Insurance Co	, 2016 before me, a, who being by m and	ne duly sworn, acknow Assista	wledged that they ant Secretary	signed the above F, respec	Power of Attorney tively, of the said
Jacqueline M. Boo	isqueline M	7. Boeller Notary Public	MOTARY OFFICIAL PUBLIC STATE OF ILLINOIS COMMISSION EXPI	. SEAL"		